SECTION 13 - CENTRAL MATERIAL SERVICE.

I. GENERAL INFORMATION.

The Central Material Service (CMS) will provide processing service for items requiring sterilization and will assure all items are being uniformly decontaminated and repackaged. The instrument manufacturer, the Chief, Central Material Service or the Hospital Infection Control Officer should be contacted if there is a question of whether an item can be sterilized or what type of sterilization is required.

II. SPECIFIC

A. REUSE OF DISPOSABLE MEDICAL EQUIPMENT AND SUPPLIES.

1. This policy applies to all departments, activities, and services throughout DHCS.

2. Disposable equipment and supplies designated for single patient use are to be used once and discarded. They are not to be reprocessed without written permission from the Performance Improvement Committee and/or Surgery QI Committee.

B. SPECIFIC PROCESSING POLICIES.

1. Instruments submitted for sterilization should be processed IAW Central Material Service guidelines:

a. Gross contamination will be removed from patient item surfaces by ward personnel using appropriate individual barrier protection prior to sending the item to CMS. This DOES NOT mean ward personnel will DECONTAMINATE articles prior to sending to CMS. The intent of CMS processing is to minimize handling of the used items on the nursing units. Items will be soaked in a solution of an enzymatic detergent prior to transport to CMS. (Reference Section 13 A)

b. Items that can be reprocessed should be taken to CMS in a closed plastic bag (no sharps inside) or covered container labelled with a biohazardous symbol to prevent environmental contamination during transport.

c. CMS will not accept wrapped items for sterilization.

d. Accountability for unit instruments will be done IAW CMS policy.

2. FLASH sterilization will not be used as an alternative to conventional sterilization processes and not for any device intended for implantation.

3. Any area which performs sterilization of patient equipment must have the approval of the Surgery QI Committee.

4. Processing will be done E.H. Spaulding's classifications. He developed three general classifications of medical instruments, based on their relative risk of causing an infection. From his classifications, the level of sterilization can be determined.

a. Critical items **-** those that contact sterile tissue or the vascular system, such as surgical instruments, needles, cardiac and urinary catheters, or implants. These items must be **sterilized** and rinsed with sterile water. Items assigned to this category present a high risk of infection if the item is contaminated with any microorganism, including bacterial spores.

b. Semicritical items - those items that come in contact with mucous membranes or nonintact skin, such as endoscopes, diaphragm-fitting rings, and respiratory therapy/anesthesia equipment. These items must be free of all microorganisms, with the exception of high numbers of bacterial spores **(high-level disinfection).** Intact mucous membranes are generally resistant to infection by common bacterial spores, but are susceptible to other organisms, such as tubercle bacilli and viruses.

c. Noncritical items - those that come only come in contact with intact skin, but not with mucous membranes - such as blood pressure cuffs, bedpans, toilet seats, bedside tables, and bed rails. Intact skin acts as an effective barrier to most microorganisms, and sterility is not critical. They require only **intermediate or low-level disinfection**. (Use *Cavicide*, 70% alcohol, Bleach 100 ppm, phenolic germicidal detergent - *Expose II*, or a quaternary based germicide with a synthetic detergent – Virex 256)

5. There will be an approved written decontamination procedure and the unit will keep a written record of all processing.

6. Any area performing sterilization using a mechanical sterilizer will keep a record of required documentation which include the following:

a. Load Number (sterilizer, load, Julian calendar date).

b. Actual time interval of sterilization.

c. Maximum temperature achieved.

d. Biological sterility testing data results.

e. Recall information of sterility testing is positive.

f. record of preventive maintenance completed on the sterilizer.

7. Sterilization is performed in the DHCS by means of steam, STERIS, and STERRAD, IAW manufacturer's recommendations and unit SOP. Reference individual policies for the above in the areas where the process is used. Ethelyne oxide is no longer available in the DHCS.